

**THE ANIMAL FEED (HYGIENE, SAMPLING etc. and ENFORCEMENT) (ENGLAND)
REGULATIONS 2015**

Application for Registration of Premises under the Feed Hygiene Regulations.

Part 1 – Applicant(s) Details

1. Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please specify)		
Surname:		
Other name(s):		
2. Home Address:		
Postcode:		
3. Telephone:	Daytime:	
	Mobile:	
	Evening:	
4. Email Address:		
<i>[please give as many contact details as possible in case we need to contact you]</i>		
Joint Applicant (if applicable)		
5. Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please specify)		
Surname:		
Other name(s):		
6. Home Address:		
Postcode:		
7. Telephone:	Daytime:	
	Mobile:	
	Evening:	
8. Email Address:		
<i>[please give as many contact details as possible in case we need to contact you]</i>		

As occupier/proposed occupier(s)* of the premises hereinafter mentioned HEREBY MAKE APPLICATION in pursuance of the provisions of the Animal Feed (Hygiene, Sampling etc. and Enforcement) (England) Regulations 2015, for REGISTRATION or APPROVAL under the aforementioned legislation, at the premises of which particulars are given below:

Part 2 – Premises Details

9. Postal address of premises where the activity requiring registration or approval is undertaken:

Postcode:

Part 3 – Activity or activities

10. Activity or activities carried on the premises:

Part 4 – Declaration and Checklist (please tick)

- I/We* Confirm that, to the best of my/our* knowledge and belief, the information contained in this application is true.

Part 5 – Signature(s)

11. Signature of applicant or applicant's solicitor or other duly authorised agent. If signing on behalf of the applicant, please state in what capacity:

Signature:

Print Name:

Capacity:

Date:

12. For joint applications, signature of 2nd applicant, or 2nd applicant's solicitor or other authorised agent. If signing on behalf of the applicant, please state in what capacity:

Signature:

Print Name:

Capacity:

Date:

[Where there are more than two applicants, please use an additional sheet clearly marked "Signature(s) of further applicant(s)". The sheet should include all the information requested in paragraphs 19 and 20 above.]

[Where the application is to be submitted in an electronic form, the signature should be generated electronically and should be a copy of the person's written signature.]

Part 6 – Contact Details

13. Please give the name of a person who can be contacted about the application:

14. Please give one or more telephone numbers at which the person identified in question 21 can be contacted:

Daytime:

Mobile:

Evening:	
15. Postal address for correspondence associated with this application:	
Postcode:	
16. If you are happy for correspondence in relation to your application to be sent via e-mail, please give the e-mail address below:	

* Delete or select as appropriate.

Return completed form to:
Trading Standards Service
Directorate of City Operations, Neighbourhoods and Regulatory Services
City of Newcastle upon Tyne
Civic Centre
Newcastle upon Tyne
NE1 8QH

Telephone: (0191) 2116102

DATA PROTECTION

Personal information provided in an application form and during the period of any subsequent Licence is normally held for a period of five years from the expiry of the last consecutive Licence held. It will be used primarily for the purpose of the licensing function concerned although it may also be used for data matching purposes across various licensing functions.

Personal information held for licensing purposes will be held and used in accordance with the requirements of the Data Protection Act 1998. To assist the Council in the prevention and detection of fraud so that it can protect the public funds it administers the Council may use information provided for licensing purposes within this Authority for data matching purposes. It may also data match information provided for licensing purposes with other public bodies that regulate, administer or are in receipt of public funds for the purposes of the prevention and detection of fraud. If you do have any queries regarding any Data Protection, please contact the responsible officer.

FREEDOM OF INFORMATION

Information held by the Council may need to be disclosed in response to a request for it within the terms of the Freedom of the Information Act 2000. This information excludes that which is in any other way already in the public domain.

FOR OFFICIAL USE ONLY Date of Application for Registration.....
Decision.....

Entered on Database: – Date